



Department of Health & Human Services
Office of the National Coordinator for
Health Information Technology

U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES
OFFICE OF THE NATIONAL COORDINATOR FOR
HEALTH INFORMATION TECHNOLOGY

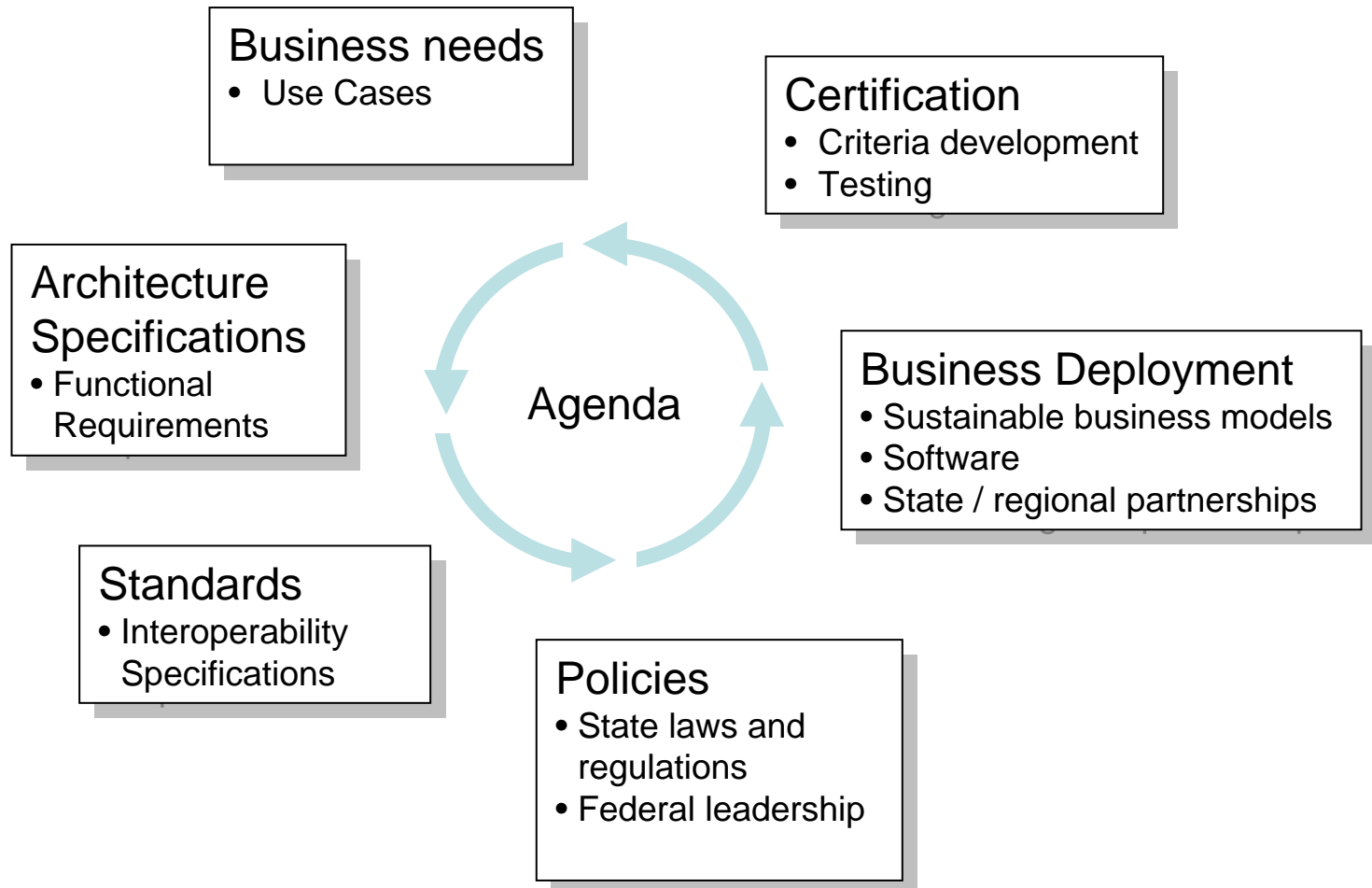
Telehealth and the National HIT Agenda

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Opportunities for collaboration

- Build on the products of the national agenda
 - Value propositions
 - Functional requirements
 - Regulation and policy considerations
 - Standards
 - Architecture
 - Certification
- Influence the next steps
 - AHIC priorities
 - National use cases

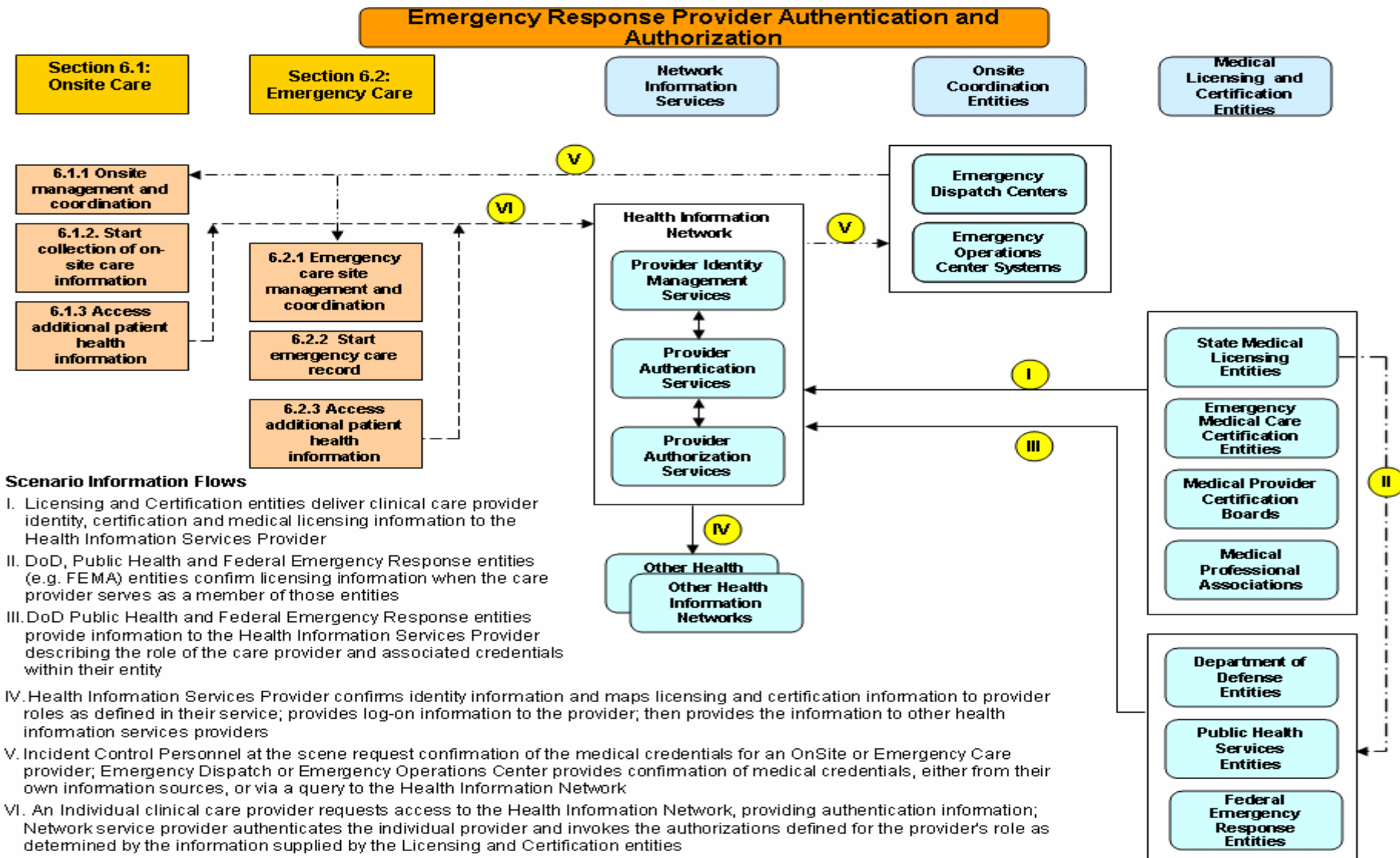
The National Health IT Agenda



AHIC Priorities (examples)

- CC 2.0 **Vital Signs** - Ability to gather and communicate patient physiological information electronically from home measurement devices to a provider's EHR system and to the consumer's PHR
- CC 2.1 **Weight** - Ability to gather and communicate patient weight electronically from home setting to one or more providers
- CC 2.2 **Blood Pressure** - Ability to gather and communicate patient blood pressure electronically from home setting to one or more providers
- CC 2.3 **Heart rate and rhythm** - Ability to gather and communicate patient heart rate and rhythm electronically from home setting to one or more providers
- CC 2.4 **Pulse oximetry** - Ability to gather and communicate patient pulse oximetry electronically from home setting to one or more providers
- CC 5.1 **Labs** - Ability for patient to report glucose readings from home measurement devices either by direct connection of the device, by entry into PHR, or via other form of electronic entry that is transmitted to an EHR/PHR (e.g. telephone keypad entry or fax image of a patient-maintained daily record of glucose readings)
- CE 4.1 **Structured email** - Ability for a consumer to compose and send a structured email to a provider in a secure manner, Ability for provider to initiate or respond to a structured email from a consumer in a secure manner
- CC 1.1 **Online consultation** - Ability for patient or family member to communicate patient information and ask questions about care management of their health care providers in a secure manner

Use Cases (e.g..)




Standards

Input Use Cases

EHR

CE

Bio



700 Proposed Standards
261 Organizations
1200 Volunteer Hours

Products

Consensus

30 standards
selected

820 pages of
implementation
guidance written

Nationwide Health Information Network / Architecture

- Functional Requirements
- Prototype architecture demonstrations and business models
 - NHIN forum January 25th – 26th
- Capabilities
 - Access to PHR registration and medication
 - Consumer permissions
 - Identifying providers of care
 - Retrieve remote EHR patient data
 - Integrating results into “local” EHR
 - Contextualizing clinical decisions

Certification (CCHIT)

U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES
OFFICE OF THE SECRETARY
OFFICE OF INFORMATION TECHNOLOGY

- Confidence in investing
 - Functionality
 - Security
 - Interoperability
 - Conformance testing
- Roadmap
 - Ambulatory care
 - specialty
 - Inpatient
 - Networking

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